NH Public Utilities Commission **REC Aggregator Portal** New Users CLICK HERE to setup your account for this form. Creating an account enables you to partially complete the form and return later to finish it or to make changes after the form is submitted. Be sure to create your account BEFORE entering information into the form. the information will be lost. RECEIVED MAR 16 2016 **Existing Users CLICK HERE** NH PUBLIC **Basic Information** Who is submitting this request? Aggregator Aggregator Batch Number KE030716 Are you registered in NH Yes O No Aggregator name Knollwood Energy - 14625 NH Reg# Aggregator Email karenton@knollwoodenergy.com Other Aggregator name Other aggregator email address **Facility Name**

Facility Owner Name

Robert Wiener

Facility Owner email
Robert@grantbooks.com
Owner Phone
603-782-0993
Facility Address
19 Surrey Lane
Facility Town/City
Hampton Falls
Facility State
NH
Facility Zip
03844
Is the facility address the same as the owner's mailing address Yes No No
Mailing Address
PO Box 187
Mailing Town/City
Hampton Falls
Mailing State
NH
Mailing Zip
03844
Primary Contact
Karen Tenneson
Primary Contact
Facility Primary Contact
karenton@knollwoodenergy.com

Other Email Address
Facility Information
Class
II .
Utility
Unitil
Other Utility Name
To obtain a GIS ID contact:
James Webb
408 517 2174
jwebb@apx.com
GIS ID (include "NON")
NON71536
Date of Initial Operation
12/28/2012
Facility Operator Name, if applicable
acinty Operator (varie, ii applicable
Panel Quantity
66
Panel Make
Canadian Solar
Panel Model
Other
Panel Rated Output
240
System capacity based on panels
15840
·

Inverter Quantity
2
Inverter Make
SMA
Add'l Inverter Quantity
NA NA
A J.P.C
Additional Inverter Make None
NOTE
Rated Output - Primary Inverter
240
Rated Output - Additional Inverter
System capacity based on single inverter make
480
400
System capacity based on two inverter types
System capacity in kW as stated on the interconnection agreement
15.84
Revenue Grade Meter Make
Landis Gyr
Was this facility installed directly by the customer (no electrician involved)?
O Yes ● No
Electrician Name & Number
Other
Other Electrician Name & Number
Megan Ulin #13139M
Installation Company
ReVision Energy

Other Installation Company Name
Others Inst. Commence. Additions
Other Inst. Company Address
Other Inst. Company City
Other Inst. Company State
Other Inst. Company Zip
Independent Monitor Name & Company
Paul Button - Energy Audits Unlimited
Other Monitor Name and Company
Is the installer also the equipment supplier? Yes No Equipment Vendor
Please attach your completed interconnection agreement including Exhibit B. https://fs30.formsite.com/jan1947/files/f-5-99-6263331_hdbGUI8H_Unitil_COC_Wiener.pdf
The project described in this application will meet the metering requirements of PUC 2506 ncluding:
Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor or a designated representative.
A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-168-6263331_hkilluU5_Wiener_-_Owner_statement.pdf

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-6263331_5xLWVr46_Wiener_SPIA.pdf

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.

Print Name

Karen Tonnesen

Date Signed

03/07/2016



UNITIL ENERGY SYSTEMS, INC. INTERCONNECTION STANDARDS FOR INVERTERS SIZED UP TO 100 KVA (Continued)

Need Jard Standard

Simplified Process Interc	onnection Application	and Service Agreement	
Contact Information:		- 500 3012	
Legal Name and address of Interconnecting Custo Customer Name (print): MUKERT K.L.	mer (or, Company name, if	appropriate)	
10 m A		mpany: CC/C-(CC-C	
City: HAMN TUN EAUL	011 111	23600	
The state of the s	1.9	The same of the sa	
Telephone (Daytime): 603-778-71	71 (Evening): 1303	2151 00 0 0 10 10 10 10 10 10 10 10 10 10 1	608 6 10 M
Facsimile Number: 1000 - 776 - 719	E-Mail Address: //	DEBLET G GNETTING	Carlo 2
Alternative Contact Information (e.g., system inst	allation contractor or coordi	nating company, if appropriate):	
Name: REUBTON ENE	194- He	astron tournier	
Mailing Address:			
City: 2xeyer	State:	Zip Code: <u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</u>	
Telephone (Daytime): 603501-180	(Evening):		
Telephone (Daytime): 6535()1-(\$) Facsimile Number:	E-Mail Address: 🔨 o	moray on who	Mycc
Electrical Contractor Contact Information (if appr			2 /
Name:		Telephone:	
Mailing Address:		-	
City:		Zip Code:	
Facility Information:			
Address of Facility: 19 Surn	10/		
city: Hampton falls	State: Ol-i	6342 Zip Code: 0354	,
Electric Service Company: JN 1711 Account	Number: 9018409-	202 Mater Number 136 396	
Inverter Manufacturer:			
Nameplate Rating: (kW) (kV/			
System Design Capacity: (kVA)		Single_V of TimeeThase	
Net Metering: If Renewably Fueled, will the ac		No	
Prime Mover: Photovoltaic Reciprocating			
Energy Source: Solar Wind Hydro			
UL 1741.1 (IEEE 1547.1) Listed? Yes		ruoi Oii 🔲 Ottiei	
Estimated Install Date: OCT 17		te: Cl 06 1 13'	
Customer Signature	Estimated III Sel 1100 Bu		
I hereby certify that, to the best of my knowledge,	all of the information provide	lad in this application is two and I cause to	41a.a
	1 850 1		the
Interconnecting Customer Signature:	Title:	Date: 5 3 10 2012	
Please attach any documentation provided by the	inverter manufacturer desc	cribing the inverter's UL 1741 listing.	
Installation of the Facility is approved contingent u		is of this Agreement, and agreement to any	
system modifications, if required (Are system mod	ifications required? Yes	No To be Determined):	
Company Signature:			
Company waives inspection/Witness Test? Yes	No		



Certificate of Completion for (Standard Process) Interconnections

Installation Information:	Check i	f owner-installed	
Customer or Company Name (print):			
Mailing Address: 19 5 urg Lo	ne		and the first of t
city: Hampton Falls	State:	NH.	Zip Code:
Telephone (Daytime):	(Evening):		
Facsimile Number:	E-Mail Add	dress:	
Address of Facility (if different from above):			
City:	State:		Zip Code:
Floring Contractor's Name (if appropriate)	11000	1 80 0 TO 11	
Electrical Contractor's Name (if appropriate): Mailing Address:	al	50099	
City: 2 x 2 + 2/ Telephone (Daytime): 603-501-1822 Facsimile Number: 603-782-0993	State:	AH	Zip Code: 03833
Telephone (Daytime): (003-501-187)	(Evening):		
Facsimile Number: 1003-782-0993	E-Mail Add	dress: <u>heath</u>	erecevisione
License number:			
Date of approval to install Facility granted by the Con	nany.	10/18/12	
Application ID number: feranai		tached	
		Œ	
Inspection:			
The system has been installed and inspected in compli	iance with th	e local Building/Electric	cal Code of
Hampton Folls			
(City/County)			
Signed (Local Electrical Wiring Inspector, or attach si	gned electric	cal inspection):	il deff.
Name (printed): Mark 51kors	ki'		
Date: * 12-27-12			
As a condition of interconnection you are required to permit to Unitil at the following address:	send a copy	of this form along with	a copy of the signed electrical
Unitil Corporation			
Attention: Generator Interconnections			
6 Liberty Lane West			
Hampton, NH 03842			

New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor, or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Robert K. Wiener	
Printed Name of signature owner	
Robert K. Wiener	

Robert K. Wiener (Jan 27, 2016)
Signature of system owner